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DOMESTIC MEDICINES.

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THE careful consideration of the public is requested to the following exposition of facts, in connection with the sale of medicine as the business is now carried on throughout the country. That gross and injurious fraud and deception are constantly practised upon the community by the various nostrum venders of the day, is plainly visible on the face of their own publications, which are thrown, broad cast, into every family, containing the most inconsistent and extravagant statements and recommendations that the ingenuity of man can possibly devise. Each one claims the discovery of some new and wonder-working composition, derived from the vegetable kingdom; possessing the strange property of curing all and every kind of disease, of whatever organ, or from whatever cause excited. For illustration, by one class we are told that all diseases arise from impurity of the blood, and that their pills are the only article in the world possessing the power of purifying that vital fluid; of course they are the only safe remedy for all possible kinds and forms of disease. A moment's reflection will satisfy any attentive mind, that the doctrine here advanced is utterly false. Instead of impurity of the blood being the cause of all diseases, it can never be the cause, but is always the consequence of disease, either functional or organic, affecting some one or more of the various organs concerned in secreting or circulating that important fluid; for while all such organs maintain perfectly healthy action, the blood can no more become impure, than a good and perfect distillery, operating on the proper material, could fail to produce a good article of any of the various oils procured by distillation. The doctrine, then, which is here taught, and which forms the basis on which such pills are palmed off upon the public, is utterly and entirely false. The community are taught to believe an error in principle, which leads to error and consequently injury in practice.

By another class we are told that their plasters are rare compounds, possessing the singular property of acting as a stimulating and strengthening plaster when wanted for that purpose, and still strangely mild, soothing and all-healing, when applied to the raw and tender surface of a large burn or scald, or to the surface of the most irritable ulcer; of course they are called *all-healing*, and directed to be used in all pos-

sible cases. What person of common sense and observation can believe this? Does not the simple fact that they are sufficiently active and stimulating to render them of any value for the purpose of a stimulating and strengthening plaster, afford conclusive proof that they cannot be used with impunity in burns, scalds, wounds and irritable sores, which positively require the most mild, soothing and healing applications.

Another class tell us that all diseases arise from suppressed perspiration, and that their all-healing ointments, when applied to the surface of the body, will open the pores and thus eradicate all kinds of disease. Who can believe that a small box of almost inert ointment, applied to the surface of the body, will at once be a sovereign remedy for inflammations of the brain, lungs, bowels, and all the various forms of disease produced by all the various causes which operate on the human system?

So wide, varied and extensive is the range of quackery, that in considering its follies and impositions, one hardly knows where to begin or where to end. A few only of the multitude can be here even hinted at. Homœopathic, hydropathic, electro-magnetic, botanic, mesmeric and Indian, all come in for a share, each claiming infallibility, and discarding every principle of philosophy and chemistry known by scientific men to have been for ages well established and incontrovertible. Look at the doctrine laid down by the founders of homœopathy. The danger to the community from this form of quackery is rather negative than positive—the neglect to do what may be needed, rather than doing a positive injury, as any medicine administered in infinitesimal doses can neither do good nor hurt. What sane man can possibly make himself believe that the smaller the dose of any given medicine, the more powerful will be the effect—the more it is diluted, the stronger it becomes? On this principle, should a lady mix a teaspoonful of salæratus with a whole barrel of flour, instead of a small mass for a batch of biscuit, the whole would become at once a strong and concentrated alkali. Who does not know that if he takes thirty drops of laudanum, he will feel the effects of the opium? but who would expect to feel as much from taking only one drop? And still more strange would it be that any effect could be felt from one millionth part of a drop. Such is homœopathy, as far as the proportion and administration of medicine is concerned. Believe it who can?

Hydropathy is of a still more recent date; or rather the revival of an old and long since exploded system, and will probably never extensively affect the community, as the expense of attending a hydropathic infirmary is too great to be met by persons in ordinary circumstances; most persons, likewise, who are sick enough to need medicine, are too sick to go to a distance, and there are but few who relish the packing in sheets dipt in cold water, well enough to follow it long.

Since scientific physicians have discovered that there are certain cases of loss of nervous power, causing palsy, which may be essentially improved by the application of electro-magnetism, there has sprung up a new race of doctors, calling themselves electro-magnetic. We now find

their signs out, and their flaming handbills posted up in almost every village, and medicine neatly bottled up, claiming to be highly charged with galvanism; so that the sick, by swallowing lightning by the spoonful, can find at once a safe and speedy cure for all their ills. The idea of administering galvanism by magnetizing medicines, and sending them about the country, is so grossly absurd, that I should not have deemed it necessary even to allude to this order of quacks, had I not recently seen upon signs in several of our cities, in flaming letters of gold, "*Electro-magnetic* Doctor." On inquiry, I learnt that they, too, had found their dupes.

The botanic class is by far the most extensive, and embraces almost the entire range of nostrum venders. All these do what they can to impress the public mind with the belief that all medicines are unsafe unless derived from the vegetable kingdom, and that what they please to call apothecary medicines should never be used. Now who does not know that the most powerful and suddenly fatal of all poisons are vegetable in their origin. Many more deaths occur yearly from poisoning with vegetable, than with mineral poisons. It is also well known that a large part of all the medicines used by the regular physicians is vegetable. The only hope of this class of quacks, is from keeping the fears of the credulous constantly excited in regard to apothecary medicines. Thus you will find every pill box, and every phial, carefully marked *purely vegetable*—as much as to say, *all is safe*. For my part I can see but little difference between being poisoned with arsenic, and strychnine—the former a mineral, the latter a vegetable product. The truth is, that good, safe, and valuable medicines, are derived from the mineral, vegetable and animal kingdoms. But all medicines, from whatever source derived, should be used only in such cases and for such diseases as they are found to be well adapted to cure.

Mesmerism has had its brief day of glory, and departed. It burst upon the world, like a flaming meteor, in the cities and in the country; hosts of lecturers were seen, with their high-sounding pretensions; the sick in multitudes attended; the clairvoyant was sent to explore the inner organs of the invalid, and reveal the remedy. But in a few brief years, the glowing light of mesmerism has passed away, and left its advocates and those it had deceived in utter darkness and dismay.

But the most strange of all is the unaccountable charm which the name of Indian possesses over the minds of many, even in a civilized and christian community. Does the civilized world go to the rude, uncultivated and ignorant savage to learn the arts, the sciences, law or divinity? Would you go there to procure a man to manage your farm, your mechanic's shop, your factory, to build your rail roads, or to teach you philosophy, astronomy, anatomy, physiology or chemistry? If not, why go there for help and advice when the human system, that most delicate and complicated of machinery, is out of order? Can it be possible that a race of beings so grossly ignorant as to be excluded from participation in every other kind of business amongst civilized men, should be wise in the healing art! The fact is well known that the Indians know but little in regard to the powers or virtues of even the most

simple vegetables, and but little if anything of the nature and cause of disease. Their medicine-men, as they are called, use but little medicine of any kind. Their only resort is to charms, spells and incantations, amulets, and consecrated medicine bags. Such superstitions are their chief reliance. Yet men in our own civilized country will gravely tell us that they have been for months or years amongst the Indians, and have there learned medical science. How many kinds of Indian vegetable pills have been thrown out before the public, with flaming show bills, rendered attractive by pictures of the rude man of the forest, in Indian costume, with the recently-gathered herbs in his hand. Such pills claim to be pure Indian medicine, such as the red man of the forest uses, and most of them claim to be a safe and infallible cure for all the ills that flesh is heir to. Most surely if Indian doctors and Indian medicine venders know anything of the business they are in, they owe it to their association with civilized society, and not to the Indian race.

The foregoing are some of the facts which are plainly visible on the face of the medicine traffic, as it now stands before the public. What can be more evident, than that the man who recommends a given medicine for the cure of diseases, directly opposite in their nature and causes, is either grossly ignorant of the properties of medicines and of their effect on the human system, or else that he designs to deceive. One or the other must of necessity be true. That many of the medicines before the public are prepared by men wholly unacquainted with medical science, is abundantly evident, from the fact that many of them are persons claiming the venerable title of Rev., and many are persons who palm themselves off upon the public under the assumed title of Dr., when it is well known that they have never devoted a single moment to the study of medicine in any of its numerous branches. To suppose that such persons are qualified to prepare and prescribe medicine judiciously, is to suppose that any other men in the community, of similar occupation and education, can do the same. For the past twenty-six years my time and energy have been almost exclusively devoted to the study and practice of medicine in all its various departments. For years past I have witnessed, with feelings of regret, the evils thrown upon society by the injudicious and often unnecessary use of patent medicines; the sick man often taking an article in no way adapted to his necessities, and the well one often taking it to keep himself so.

The question may be here raised, to whom does all this wrong become chargeable? The first and foremost in the wrong in this case are certainly the men who deceive by false doctrine, or by pretensions above what simple facts will warrant. The deceived, when no influence is used to prevent them from being deceived, by presenting the truth to the mind, are certainly not to be blamed. I would here ask, has the medical profession done its duty to the public in this matter? When error and fraud have been posted up in every village in the land, and physicians have witnessed their withering influence in the many cases which have fallen under their observation, what effort have they made to correct public sentiment, and to spread out light and truth before the mind? It is true that here and there a worthy member of the pro-

fession has ably addressed his brethren, and forcibly exposed the wrong and evils of quackery, through the medical journals; and the theme of quackery has formed the thread of discourse in many of the introductory lectures delivered in our medical schools. But what effect can all this have on the mass of public mind who never attend medical lectures or read medical journals? My belief is, that truth is powerful and will prevail. Let the truth in regard to medical science be faithfully and perseveringly spread out before the public, and thrown into every family, to go side by side with the vaunting and truthless publications of those who are evidently ignorant or intend to deceive, and I am willing to risk the decision of the question to the judgment of an enlightened and virtuous community.

It ever has been the case that the public will have some form or other of domestic medicines, to which they can resort, without in every case calling a physician. Now unless physicians themselves prepare such medicines, in a good and convenient form for administration, accompanied with suitable directions, we cannot think it strange that the multitude should seize upon such as are offered, especially as they are recommended and urged upon them by almost every merchant with whom they deal. The facts are, that the influence of the press, and the influence and interest of the men of trade, are all enlisted in favor of quackery. Now the question is, shall the physicians of the country stand silently by, and see the game of deception played off, and quietly surrender the whole field to the occupancy of quackery; or shall they themselves engage in that most difficult and laborious part of professional labor, and prepare and furnish to the public good and efficient medicines, honestly and faithfully recommended, with plain directions for their proper use? This course suggests itself to my mind as the only one which at the present time can be successfully adopted to combat medical error and delusion. I hope yet to see the time when the various boasted nostrums which now crowd the shelves of all our apothecaries and stores, will give place to medicines prepared by men of science and medical experience, and directed to be used each in its proper place and order. When this shall be done, then shall I believe that physicians have faithfully and honorably discharged to the public the high and responsible duties of their station as conservators of the public health.

Brownington, Vt., May 7, 1849. J. F. Skinner, M.D.

SKETCHES OF EMINENT LIVING PHYSICIANS.—NO. V.

CHARLES D. MEIGS, M.D., PROFESSOR OF OBSTETRICS AND THE DISEASES OF WOMEN AND CHILDREN IN JEFFERSON MEDICAL COLLEGE.

"By learning and fair science crowned,
Behold him now full fraught with wisdom's lore,
The laws of nature anxious to explore,
With depth of thought profound."—*Antigone, Sophocles.*

There is something in the contemplation of genius and successful industry, which is well calculated to soothe and elevate the soul in mo-

ments of sorrow and despondency. Man, in his little career and puerile vanities, often disgusts us with the weakness and fickleness of his character, and the evanescent duration of his fame or life; but the contemplation, particularly, of acknowledged talent and moral worth, is at once grateful and ennobling. Some men are famous, because they have been born so; others are distinguished by a "fortuitous concourse" of circumstances; while others, by the unceasing efforts of their own innate energies, move steadily onward, to dignity and renown. Of the latter description are many of the most influential minds in our profession and the republic. The senate, the bar, and the pulpit, teem with this species of native genius; and medicine, although offering fewer opportunities for popularity among the masses, yet boasts among its ranks some of the brightest ornaments of our country.

Charles D. Meigs was born in 1792, in the Island of Bermuda, where his parents had emigrated from the East on account of the ill health of the father. Some time after this, the family removed to Athens, Geo., where the elder Meigs had charge of a literary college. We have been able to collect but few anecdotes of the early history of Dr. M. In a new country, as Georgia was at that time, the wild sports of the chase, and other rustic employments, would most likely occupy an ardent and most *mobile* boy. Riding on the half-tamed horses of the wilds, without saddle or bridle, *a le Mazeppa*, seems, according to his own testimony, to have been his favorite employment. Sitting, as he graphically describes it, on the margin of lake or river, watching the spray-drops, listening to the carol of the birds, or snaring the wary trout, would scarcely comport with a temperament which is emphatically sanguine. Nevertheless, there might be beauty in the flowers, grandeur in the forest, or delight in the thunder storm, for one who revels as he does in variety and beauty. He not unfrequently complains of early mental training—that he was suffered to roam at large, and follow the inclination of the hour; and most of his readers and admirers will admit that there is some foundation for the complaint.

As is often the case, in our new countries, young Meigs, after a short time of reading and study, began to practise the noble art of healing; and, if we are informed rightly, without that which not unfrequently promises more than it can substantiate, a diploma. After practising in this way for several years, he came to Philadelphia to perfect his medical education; and in the year 1817 took the degree of doctor in the University of Pennsylvania. In Philadelphia, also, he took another degree, for it was here he found one of the fair daughters of the city of brotherly love, too attractive to be left behind. She belonged to one of our most respectable families. He wooed and won her, and took her to his forest home—where, however, she pined for the dear quiet home of her girlhood, and her young but ambitious husband was induced to return to Philadelphia and try his fortune among the great masters of the time. The doubts of success yielded to affection, and the trial was made. Has he ever regretted it? Reader, shouldst thou ever visit our staid city, be sure to mark a neat, open carriage, with a span of splendid bays, dancing along like rein-deer, guided as if not guided by the delicate man-

agement of a light figure which sits erect (seeing everything and everybody) behind them. This is Dr. Meigs; the wild sportsman of the Georgia forests now amuses himself by daily practising the "rubans" in a large city, before the admiring eyes of the citizens. His fine dwelling in Chesnut street above 10th; his sons and daughters, who grow around him like the cedars of Lebanon, in honor and love; his thousands of admiring pupils from the varied climes of the world; his splendid practice among the rich, the gay, and the fashionable—are these, things which should cause him to regret the hour when he opened his humble office in 8th street—"without a second coat to his back"? I trow not; and if his heart occasionally yearns for the wilds of his boyhood, it must be chided back by the troops of friends which greet him on every side.

In 1828 we find Dr. Meigs engaged with a band of spirited writers, many of whom are now the great lights in medicine, in editing a medical journal. Biographical sketches, interesting cases, translations and editorials, flowed freely from his prolific pen, even then—how much more freely during the last four years! A work on phrenology, and two large ones on obstetrics—an original work on midwifery—letters to the class on the diseases of women and children, and articles on cyanosis, chloroform, &c. &c., flow from his pen like a perennial fountain, and, literally almost, all the (reading) world "and his wife" reads them.

In 1837, Dr. Meigs, with Drs. Gerhard, Houston and Ruan, was appointed, by the College of Physicians, to act in concert with a similar committee elected by the trustees of the legacy of Dr. Jonas Preston, in arranging the best plan of building and conducting a hospital for the reception of "indigent parturient married females." This Hospital, which is termed the "Preston Retreat," stands in the north-western part of the city, encased with marble and fronted with noble marble pillars of the doric order. It forms a bright ornament to the city, and a splendid monument to the memory of the benevolent founder. The crisis in trade, in 1837, however, so reduced the value of stocks in which the legacy was chiefly invested, that the building of the house consumed more than the available funds, and consequently it is not yet open for the reception of patients. In the prosecution of the duties of this appointment (he was chairman of the committee), Dr. M. corresponded with the best obstetrical authorities in Europe; and through the agent (Dr. James Bryan) appointed to visit the various lying-in hospitals of the old world, obtained all the information necessary to the task. It is, perhaps, unfortunate that the plan of Dr. Meigs, viz., to build a small portion of the house first, and fill it with patients gradually, and enlarge the accommodations as they were demanded, was not followed. As it is, some $80,000 have been spent, and ten years have passed away without accomplishing the objects of the testator.

Dr. Meigs, by this correspondence and other means, has become intimate with the leading obstetricians of Europe. Collins of Dublin, Simpson of Edinburgh, Velpeau of Paris, &c. &c., are his correspondents and friends, although his views, on many important subjects, are widely different from some of theirs—vide Simpson on chloroform, Medical Examiner, April and May, 1849. CATO.

[To be continued.]

DEATH FROM FRACTURE OF THE CRANIUM.—FOR ALL WHO WILL TEACH.

To the Editor of the Boston Medical and Surgical Journal.

Sir,—The design of the following communication is to present a faithful account of the cause, treatment, progress and termination, of the case under consideration, with a view to solicit the opinions of those of your correspondents, who are pleased to offer them, in regard to the propriety of the treatment pursued, and to obtain their suggestions as to the one that should have been adopted; feeling assured that this case affords at least a small opportunity for such suggestions. Be it understood that in presenting this communication I have no invidious, vindictive or evil design, but only desire, by eliciting the opinions of the experienced in these matters, to make it a source of instruction to those who, like myself, are preparing themselves for the arduous duties, and posting themselves for the emergencies into which their avocation as practitioners of medicine is likely to call them. In order to avoid a charge with the former, while at the same time it will not defeat in the least the latter design, I shall omit the names of any of the parties concerned, merely stating facts as they occurred; and if you deem it worthy of a place in your Journal, you will oblige much by inserting it.

On the 7th inst., M. N., a young man aged 25, of strong constitution and vigorous health, while engaged in sawing wood was struck by a billet, thrown with considerable velocity, in the left supra-orbital region, about an inch and a half above and a little inward from the outer angle of the orbit, contusing and lacerating the scalp but slightly at that point. A depression of the walls of the cranium was produced, extending from the external wound inward, along and above the supra-orbital ridge to about an inch from the mesial line. This depression varied in depth from two to three lines.

A physician was called, who upon examination decided that nothing was to be done but dress the external wound, which he did by adjusting the edges of the lacerated scalp, and securing them by strips of adhesive plaster. No operation by trephining was deemed necessary by him, as in his opinion the external table alone was injured, and the depression produced by the external table having been sunken into the *frontal sinus*. Re-action came on in a few hours, attended by alternate fits of delirium and coma.

On the 8th, returning to his patient, he found him delirious, talking constantly and incoherently, rolling of the head, jactitation and great restlessness, so great as occasionally to require restraint; these alternating with low muttering delirium and deep coma, constipation and much arterial excitement. Prescribed mild cathartic.

On the 9th, symptoms becoming more grave, the doctor was summoned to the patient, who still remained delirious and comatose as before, high vascular excitement, and constipation. He now concluded to bleed the patient, in which attempt, however, he was but partially successful, as but little blood could be induced to flow. He cupped him also on either temple, gave active cathartics, and prescribed laxative enema.

On the 10th, the mental and physical derangement increasing, at the request of the friends of the patient a very intelligent and experienced physician was called in consultation, who decided that an operation at that time for removing the cause of irritation from the brain would probably hasten the death of the patient, which was then evidently near at hand; and with the advice to move the bowels if possible, he left him, not doubting that in all human probability his term of earthly pilgrimage was very near to a close.

On the 11th, nothing more having been done, he died, having lain ten or twelve hours in deep coma.

Post-mortem Examination, fifteen hours after death. The left eyelid and parts about it considerably ecchymosed. The depression of the cranium about the seat of injury very apparent to the extent before stated. On laying aside the scalp, the external table was found comminutely fractured, from about an inch of the mesial line outward, both up and down, including the supra-orbital ridge and all of the external angular process of the frontal bone, partially severing it from the frontal process of the malar bone, and upwards an inch above the external lesion. The external table being removed, the internal one was found fractured to a still greater extent, as usually occurs. From the superior line of fracture, a portion of this table was depressed, that is to say, its inferior edge was depressed while its superior edge retained its natural position nearly. A little lower, two fragments of the comminuted plate were found thrust through the dura mater into the sac of the arachnoid membrane. The remaining pieces were not greatly displaced. The two fragments, it may be well to state, were about three eighths of an inch in diameter, and of irregular form. Proceeding downward, the orbital plate of the frontal bone was found broken into a number of pieces, and one of them, a piece half an inch long by one quarter broad, was thrust nearly its whole length through the membranes into the substance of the brain. The remainder of the fragments were not badly displaced, save being some considerably depressed, as was all of the cranium about the seat of injury. The vessels of the brain and membranes were deeply engorged with dark grumous blood, giving the whole brain a much darker color than natural. All appearances evinced it to have been the seat of violent inflammation.

Having now stated the cause, treatment, progress and termination of this case, together with the *post-mortem* appearances and condition, also the appearances immediately after the injury, you have sufficient premises for founding a conclusion as to the mode of treatment that this case required. Those whom experience has made wise, will, I trust, grant my request by giving their opinion through the Journal, not only for the benefit of the tyro who requests, but for all, and for the patients they perchance may have. S. R., Medical Student.

Lyons, Wayne Co., N. Y., April 21st, 1849.

PROSECUTION FOR MAL-PRACTICE

BY WALTER K. MANNING, ESQ.

[Communicated for the Boston Medical and Surgical Journal.]

Supreme Court at Lowell—Francis Conant, *vs.* Peter Manning. This was an action against Dr. Manning, of Lunenburg, Mass., a surgeon of very respectable standing, for an alleged want of skill and care in the reduction and cure of a dislocation of the plaintiff's thigh. It appeared in evidence that on the 27th of December, 1847, Mr. Conant, who lives in Stow, was driving an ox team with a load of wood upon a sled, in the town of Lunenburg, and fell under his oxen, and the load passed over him. He was severely bruised; and it was found that his lower jaw was fractured on each side, and his thigh-bone dislocated; that Dr. Manning was called immediately, and after great exertion, for several hours, the limb was reduced, and the usual measures were adopted to retain the limb in its place. But it was ascertained that the dislocation was accompanied with a very considerable fracture of the socket, and that it was extremely difficult to keep the head of the bone in its place. Mr. C. continued upon his bed three or four weeks, and then began to move about the house on his crutches. He then became very impatient, and was desirous of returning home; but being admonished by the Dr. of the danger of leaving, he was induced to remain until the 15th of February, 1848, when, against the advice of Dr. M., he left and returned home. On the 2d of March, he returned to Lunenburg to see the Dr., assuring him that his limb was doing well, and that he was much better, and indeed had found the belt prescribed by the Dr. unnecessary, and had laid it aside. Dr. M. then examined him, and found that his limbs were nearly of the same length, and that he had considerable use of the limb that had been dislocated. He returned home, leaving the impression upon the mind of the Dr. and all who saw him, that he was doing as well as could be expected under the circumstances, though Dr. M. urged upon him the importance of resuming the belt.

On the 22d of March, having been advised by his family physician to apply for aid at the Massachusetts General Hospital, after an examination by the surgeons of that institution Mr. C. was subjected to a severe operation for the purpose of improving the condition of his limb. The operation was in a measure successful; he had a better use of his limb than before. But an entire restoration has not been attained, nor was it expected by the surgeons at the hospital; the limb remaining more than two inches shorter than before the injury.

The plaintiff introduced witnesses who testified, that while he remained under the care of Dr. M., the latter told him frequently that he "was getting along well," that "all was right," &c. His counsel contended that the surgeon had misrepresented his condition, and that he had thereby suffered damage. Several surgeons of the hospital were called as witnesses, who testified that the case of Mr. C. was most difficult—both to understand and to manage; that it was not to be expected that under any treatment the limb could be restored, and that there was nothing shown in the case that indicated either want of skill or want of care in

Dr. Manning. One of those gentlemen, who had been present and heard the whole testimony, and who had been notified that his opinion would be called for, gave his opinion that there appeared to be no fault on the part of Dr. Manning, but that the case had been treated by him as well and as successfully as it could have been treated under the circumstances. It was admitted by the counsel for the plaintiff, that there was no fault or want of skill in reducing and curing the fracture of the jaw, nor in reducing or subsequent treatment of the hip, but it was contended that the Dr. had misrepresented the condition of his patient. The jury returned a verdict for the plaintiff for $362,50!!!! The defendant being dissatisfied with this result, made a motion at once for a new trial, on the ground that the verdict was manifestly against the weight of evidence, and moved the judge who held the court (Mr. Justice Dewey), that the evidence might be reported and submitted to the whole court for that purpose, which motion was sustained by the court.

E. R. Hoar, for the plaintiff; G. F. Farley and George Bancroft (of Suffolk), for the defendant.

It is obvious to remark, that the foregoing case is one of the most extraordinary character, and *interesting*, if not alarming to the whole profession; but as it will probably be again submitted to a jury, propriety forbids any comment upon its merits.

ADAPTATION OF GOLD PLATES TO THE ROOF OF THE MOUTH.

BY W. T. G. MORTON, M. D.

[Communicated for the Boston Medical and Surgical Journal.]

In order that the subject of this article may be fully comprehended, and its importance duly appreciated, it will be necessary to make a few preliminary remarks on the principles of pneumatics; without these, it would be difficult, if not impossible, to explain the phenomena of atmospheric pressure.

Atmospheric air may be considered as a permanent, elastic fluid; although, from the experiments of Mr. Perkins, it appears that common air may be reduced to a liquid by great pressure. The invisible, transparent fluid which we call *air*, whose ultimate particles seem destitute of cohesion, readily yields to *pressure*, within certain limits; unlike liquids, the particles of air, though indestructible, will contract and expand under the influence of pressure, independently of temperature.

Another remarkable property of air, is its *elasticity*, in virtue of which it regains its original bulk when any compressing force, to which it has been subjected, is removed, the non-cohesion of its particles and their repulsive power giving it a tendency to expand again in all directions the moment the pressure is taken off.

It was not till the time of Galileo that experiments were instituted to show that *air* was as much a material fluid as *water*, only much less dense; he concluded that air makes a definite pressure upon every object on the surface of our globe. Torricelli and Pascal proved that this was occasioned by its *weight*, and from this they deduced the height of the

atmosphere. It was afterwards analyzed, and found to be, not an elementary body, as the ancients supposed, but a compound of nitrogen and oxygen. Like solids and liquids, air has *weight*, which may be ascertained by the balance; a cubic foot of air weighs about an ounce and a quarter. Its specific gravity is 1, it being taken as the standard of comparison in finding the specific gravity of gases. Like all ponderable matter it must, therefore, produce a pressure in proportion to its mass; every thing at the surface of the earth must sustain a pressure from the atmosphere above, equal to a column of *water* about *thirty-four feet* in height, or a column of *mercury thirty inches* high and one inch square at the base; this is about fifteen pounds to the square inch. Supposing the human body to contain 2000 square inches, the atmospheric pressure upon its surface would be 30,000 pounds. This immense pressure is not perceptible, as it acts equally in all directions; it is only when this equilibrium is destroyed, by removing the pressure in one direction, that the weight of the atmosphere becomes evident: all the cavities of the body are filled either with air or denser fluids, which counteract the pressure of the external air.

The pressure of the air, arising from its weight and elasticity, is the cause of a great number of natural phenomena; man, also, has turned his knowledge of its properties to great advantage in many operations of science and art. One of the most ingenious, happy, and useful applications of this knowledge is in the adaptation of *artificial teeth*. This department of dental science has now arrived at great perfection, and nowhere is it better understood, or more scientifically pursued, than in this city.

The proper insertion of artificial teeth is an operation undertaken by many dentists, but accomplished by few. Every practitioner, acquainted with the surgery of the mouth, must have had frequent occasion to observe the inconveniences, and often serious injury, caused by the unskilful application of artificial teeth.

The honor of first applying teeth on the atmospheric principle belongs to Mr. Gardette, of Philadelphia. He made use of an *ivory* plate, which was with difficulty fitted with sufficient exactness to exclude the air, and consequently would drop out from the slightest causes. A *gold* plate was afterwards substituted, which could be fitted with greater accuracy, and which adhered more firmly; but it was very difficult to ensure complete success by this, either from the want of perfect adaptation, or changes in the alveolar ridge after insertion, which would allow the introduction of air and cause the apparatus to drop.

In the old method, however accurate the fitting of the plate, adhesion, sufficient to answer the ordinary purposes of mastication and articulation, could not be depended on. In some cases a partial success was obtained, but the *best* set would not adhere with much tenacity at first; it was necessary to wear it some time before the adhesion would be comfortably firm.

Aware of the disadvantages of the old plates, and anxious to remedy them if possible, I instituted a series of experiments, the results of which are given below. After much labor, I have succeeded in making a plate,

retained by a new modification of atmospheric pressure, in which the inconveniences of slight adhesion and the consequent discomforts are completely obviated. Its operation has been witnessed by several scientific gentlemen, and its success has been already demonstrated in many difficult cases in this city.

The advantages of my improvement are—that the degree of adhesion is nearly as great, whatever the size or shape of the alveolar ridge—that the adhesion is more perfect and *instantaneous*, being as great at the moment of introduction as at any subsequent period—that the adhesion is much greater than by the old method. The experiment of attaching considerable weights to my plates has been made; they have borne with ease a weight of *ten pounds*, and more might have been added, were it not for the fear of irritating the patient's mouth. This approaches very nearly the fifteen pounds of the pressure of the atmosphere on every square inch of the surface. Finally, these sets may be inserted and retained in many cases where it would be impossible by the old method.

As this paper has already reached a considerable length, we will defer to a future period a more detailed account of the *modus operandi*.

HYDROCEPHALUS.

To the Editor of the Boston Medical and Surgical Journal.

Sir,—Should you think the following case of sufficient interest to present to your readers, it is at your disposal.

The subject of the case was Susanna G., of this city, a littl girl about 11 years of age, who died the 18th of April last. Dr. Tharpe, whose patient she was, called upon me to assist him in the *post-mortem*.

The head presented a greatly enlarged appearance. The cranial bones were remarkably thin, flexible, and almost diaphanous. The *dura mater* adhered so strongly to the interior of the cranial vault as to require considerable force in its separation. A slight incision in the cerebrum opened into a large cavity, from which was discharged not less than one quart of fluid of clear serum or water.

On examining this cavity it was found to occupy the whole interior of both hemispheres of the cerebrum. The lateral ventricles in each were all thrown into one—their original form completely destroyed, and the three so communicating and running together, and then expanding outwardly in every direction, except the base, as to present the enormous cavity just mentioned. The whole superior and lateral portions of the hemispheres composing the walls of this cavity, were quite thin, so that at some points the substance of the brain seemed to be almost entirely wanting, and nothing left but the meninges to form the walls of the ventricles. The interior lining of this cavity consisted of a strong membrane, everywhere covered with an immense number of injected capillaries. This membrane, so firm and dense, was doubtless the reflected portion of the *tunica arachnoidea* lining the ventricles, and become thickened from inflammation and the effusion of coagulable lymph.

The *cerebellum* presented a somewhat similar appearance—to wit, a

large cavity occupying both hemispheres, filled with a similar fluid, but containing in addition a quantity of purulent matter. This cavity was also but one for both hemispheres of the lesser brain, and seemed to be formed by the expansion laterally and inwardly of the fourth ventricle. In the natural state, it will be recollected there is but a small space.

Remarks.—The above case presents a practical truth, exceedingly curious and interesting to the physiological and philosophical inquirer, as all the symptoms so completely upset and contradict what we generally look for and expect in such a state of things. For instead of finding the intellect impaired, and the senses disturbed, the attending physician informs me that on the contrary nothing of the kind occurred till within a very short time of her death, when the pupils became dilated, and there were spells of occasional screaming. There was also at this late period intolerance of light and sound, and some delirium, from which, however, she was readily aroused, and became rational.

But the question comes upon us with all its force, and most especially in its phrenological aspect—how was it possible for the brain to undergo such a loss of substance, and sustain such an immense weight of pressure from the quantity of fluid present, and that for so long a time (for it seems that the enlargement of the head was noticed soon after birth, and observed to steadily increase, to such a degree, in fact, that the fontanelles were not closed till about the eighth year)—we say the question is, how could the *brain* and *nerves* endure all this pressure, and not manifest any disturbance in the mind and senses, so as to present symptoms, which would at once direct the attention of both physician and parents to the ravages already existing, and constantly going on to the day of her death? With the exception of the enlargement of the head, there was nothing to excite any suspicion of the true state of things, and of the character of that fell destroyer which swept her into an early grave.

The *practical inference* we draw from the above, seems to be, that as the brain is capable of undergoing so great a loss of structure, and sustaining so great a pressure from fluid, without making any report of such fatal changes, the physician should give the strongest heed to apparently the most trivial complaint in the brain, and be inclined to suspect an incipient, lurking inflammation—which, as in the above case, might, unattended to, run to a fatal termination.

I neglected to mention that this child was never able to use her lower extremities, either in walking or standing. It did not seem to be paralysis, as she could move them in the bed, but simply an inability to sustain the weight of the body. She had the free use and strength of her arms, and her general health was good.

Yours respectfully,

Baltimore, Md., May 12th, 1849. W. R. Handy.

REMARKABLE CASE OF RECOVERY FROM A GUN-SHOT WOUND OF THE HEAD.

BY DAVID RICE, M.D.

[Communicated for the Boston Medical and Surgical Journal.]

Henry W. Richardson, aged 14, son of Francis Richardson, of Leverett, on the 28th of Sept. last, received a severe gun-shot wound in his head. A considerable portion of the substance of the brain was traversed by the ball, but the boy has now quite recovered. I deem the case of sufficient importance to be reported, being in my opinion a rare and interesting one. The circumstances connected with, and leading to, the accident, are as follows :—

George, an elder brother, was in the house loading a rifle, preparatory to firing at a target, at some distance, through an open window. Henry was at the barn unloading a cart, and not being aware of danger, ran to the house, in a foot-path leading directly by the window from which George was about to fire his rifle. He passed by it just as the piece was discharged, the ball entering his head when within two feet of the muzzle. He fell lifeless, and was supposed to be quite dead for nearly an hour. He was carried into the house and laid upon a bed. I saw him for the first time in the evening, about four hours after the accident. I found him comatose, extremely pallid, the whole surface of his body and extremities cold and clammy, pulse hardly perceptible, and the breathing discernible only by close observation. I found that the ball had passed directly through his head, as considerable portions of brain were hanging both at the entrance and exit of the shot. I proceeded to shave the hair from around the external wounds, and to apply a *temporary* dressing, supposing that the lad would probably die before morning; but on visiting him again at sunrise, I found, much to my surprise, that he was still alive, and that the powers of life had considerably rallied. I removed the dressings, examined the wounds more accurately, and removed several comminuted fragments of bone, with shreds of membrane and brain, that hung from the injured parts in view.

He remained entirely unconscious for six days after the injury. The left side of the body was completely paralyzed up to this time. On the seventh day, the swelling of the scalp having subsided, I ascertained, on examination, that the skull was considerably fractured and broken up, at the place of exit of the ball. I made a crucial incision through the scalp at this place, dissected up the corners, and removed, with an instrument, several pieces of bone that had been partially broken off from the skull by the force of the shot, and were making some pressure upon the brain.

From this time the boy evidently began to amend. His bowels were easily moved by cathartics; whereas before, there had been but little action, and it was with difficulty that a stool could be procured. His pulse and breathing assumed a more favorable aspect, and gradually became natural. He had an evident relish for food, and began to talk. The paralyzed portion of his body, from this time, rapidly regained its normal action. In four weeks from the accident the wounds had com-

pletely healed, and the boy could walk about the house, and converse with his friends, although there was as yet but little strength in the left side of his body.

The only dressing applied, through the whole course of treatment, was simply strips of linen, secured over the wound with adhesive plaster. These were changed as often as they became loosened. The head was wet freely with brandy and water, and a solution of sugar of lead. The bowels were kept open with castor oil and a decoction of senna. The diet consisted entirely of fluids for the first fortnight; after that, he was allowed more nutritious food.

The anatomical facts as to the boundaries of the injury are as follows. The ball (sixty-seven weighing one pound) entered the head in the right temple, about one inch above and in front of the ear, passing through the lower part of the frontal suture, a little above its junction with the sphenoid bone, and passed out at the back part of the head, through the lambdoidal suture of the same side, a few lines below its apex The distance from one wound to the other was about five inches and five eighths. These measurements show that the ball must have traversed nearly or quite five inches of the *substance of the brain.* The boy is at the present time quite well, although he has some peculiarities that he did not have before the injury. He has a slight stoop in his shoulders, and goes with his head down more than formerly, and is more inclined to mirthfulness.

Leverett, Mass., May 1st, 1849.

THE BOSTON MEDICAL AND SURGICAL JOURNAL.

BOSTON, MAY 23, 1849.

Remedy for Quackery.—By referring to a communication from Dr. Skinner, of Vermont, in to-day's Journal, it will be perceived that, in common with the whole profession, he laments the mighty evil of quackery, which neither legislation—appeals to reason—nor the baneful results on society of an almost universal patronage of nostrums, has in the least degree corrected or diminished. He therefore proposes an entirely new system of operations to counteract this national disgrace and injury to the people—viz., by supplying them with medicines, in a popular form, which are in themselves useful. Medicine mongers, he suggests, may be driven from the ground in this way, and in no other. Agents, and all others deriving advantage from the immense trade in nostrums now carried on throughout the whole length and breadth of the country, would prefer to sell articles from a responsible source; but if physicians of acknowledged standing will not furnish them, they will traffic in such as are provided, whether good or bad, because there is a constant demand for popular medicines, it being part and parcel of the American character to be constantly dabbling in supposed remedies for all kinds of diseases. Whether Dr. Skinner will be countenanced in his project by his brethren, we are unable to determine. Perhaps it may be said that we are not justified in doing

wrong, that good may follow. To his high and honorable bearing, eminent professional abilities, and philanthropy, we can bear testimony. It would be gratifying to have the opinion of our correspondents upon this novel proposition.

Gold Plate Work in Dentistry.—Those who are interested in the onward progress of the mechanical part of dentistry, will read the communication from Dr. Morton, in the Journal of to-day, with much satisfaction. We recently examined a specimen of the beautiful philosophical contrivance referred to, by which a plate, fitted to the roof of the mouth, actually sustained a weight of ten pounds, by the mere pressure of the atmosphere. If it is an old principle, it is certainly a very admirable one, which in this particular application commends itself at sight. If our operators would obviate the swaying, sliding movement which the tongue, in an imperfect cast of the region, gives to an upper set of artificial teeth, they would at once be influenced by the suggestions contained in this article. Dr. Morton deserves the thanks of practitioners and the public for this improvement in the practice of dentistry.

New Tourniquet.—Daniel Huntington, M.D., of Rochester, Vt., has invented a curious little instrument for restraining bleeding vessels, which would be an excellent tourniquet under any circumstances. The idea is to use a pocket handkerchief, a ribbon, or a cord, instantly, if necessity requires. It is really a beautiful winch, which with a rachet wheel and dog, holds a grip which would be equal to all emergencies. While it combines all the advantages to be found in any and all the known kinds of tourniquets, it is far more simple than any of them in point of construction, cheap, and yet powerful and certain in its action. Should Dr. H. cause his new instrument to be manufactured for use beyond his own practice, we hope that surgeons will not only give it a fair trial, but also announce their opinions to their professional brethren.

Chemical Analysis.—Messrs. Lindsay & Blakiston, Philadelphia, publishers whose names are familiar to students in every department of human knowledge, have sent abroad an uncommonly well-proportioned volume, as rich in matter as it is inviting in external appearance, on "Chemical Analysis—qualitative and quantitative, by Henry M. Noad, with numerous additions by Campbell Moffatt, a practical chemist, with illustrations." Those who have been familiar with the leading objects of this Journal, will recollect that on the subject of chemistry we have uniformly and habitually insisted that the science of chemistry is culpably neglected in many of the schools. Lectures are given, to be sure, but the faculties do not sufficiently insist upon a thorough system of reading and study upon this essential branch of a medical education. Unless the chair happens to be filled by a man of very commanding reputation, the students quite turn their backs upon the laboratory. When brilliant experiments are exhibited, an attendance is expected; but otherwise, the seats are as empty as though a contribution of money was contemplated. We have viewed this state of things with astonishment, especially when the fact is acknowledged that a medical practitioner should be minutely familiar with pharmaceutical chemistry, at least. It would be a curious spectacle to witness the examination of some individuals on this important but neglected sub-

ject, when about to be admitted to a degree in medicine. There are books prepared for giving an insight into the leading principles of chemistry, in which all extraneous and useless speculations are avoided, and those facts are both presented and systematically arranged which facilitate the labors of medical students who do not happen to be particularly in love with what they are pleased to denominate a dull, unprofitable pursuit. The book before us is of this class, and is well calculated to create and sustain an interest in chemical studies. All the soporific qualities are happily extracted, so that one need not be afraid to encounter its pages with open eyes, in full expectation of becoming wise just in proportion to his individual efforts to master the author's profound, excellent and elegant researches. Medical students should avail themselves of this admirable guide, if they have a particle of ambition to sustain themselves, in the department of chemistry, as accomplished physicians.

Practical Compendium of Midwifery.—A course of lectures, by the late celebrated Robert Gooch, M.D., delivered by him at St. Bartholomew's Hospital, on the diseases of women and infants, prepared for publication by George Skinner—a fourth American edition—is fresh from the press of Messrs. Barrington & Haswell, Philadelphia. There need nothing be said in regard to the writings of the lamented author. His fame is extensive; for wherever civilization and science have been introduced, there the name and character of Dr. Gooch are known. Those who desire to be taught, could not go to a more worthy source for instruction. Messrs. Ticknor & Co. have this book on sale.

Dr. Lee's Valedictory.—An unusual accumulation of papers, pamphlets, books, &c., has prevented a notice of a valedictory discourse to the graduating class of the Geneva Medical College, by C. A. Lee, M.D., the Professor of Pathology and Materia Medica. A gentleman of his experience, literary reputation and capacity, would not be likely to fail, on any occasion, to meet the expectation of the public. In no former publication of a similar character, has Dr. Lee been more happy than in this. It is neither prosy nor verbose, but abounds in most excellent suggestions, and is redolent with words of wisdom.

The American Medical Association.—The officers of the Association, chosen at the last meeting, were as follows:—Dr. John C. Warren, of Massachusetts, *President;* Drs. J. P. Harrison of Ohio, H. H. Maguire of Virginia, A. Flint of New York, and R. S. Stewart of Maryland, *Vice Presidents;* Drs. A. Stillé of Pennsylvania, and H. I. Bowditch of Massachusetts, *Secretaries;* Dr. Isaac Hays of Pennsylvania, *Treasurer.*

The following are the names of the Chairmen of the Standing Committees:—Medical Sciences, Dr. Ware, of Boston; Practical Medicine, Dr. J. K. Mitchell, of Philadelphia; Surgery, Dr. R. D. Mussey, of Cincinnati; Obstetrics, Dr. Prioleau, of Charleston, S. C.; Medical Education, Dr. Roby, of Maryland; Medical Literature, Dr. A. Stillé, of Philadelphia; Committee of Publication, Dr. I. Hays, of Philadelphia; Indigenous Medical Botany, Dr. E. Ives, of New Haven; Forensic Medicine, Dr. A. H. Stevens, of N. York; Hygiene, Dr. J. M. Smith, of N. York.

Medical Miscellany.—Died at New Orleans, Antoinette Maxen, a colored woman, at the age of 135!—Dr. Aaron Young, Jr., of Bangor, Me., is to take charge of the department of the natural sciences in the Normal Institute.—Thomas Hunt, M.D., has been elected Professor of Physiology, Pathology and Pathological Anatomy in the University of Louisiana.—Dr. David Harlan goes out Surgeon of the U. S. Ship Plymouth, ordered to the Pacific, and Frank M. Grinnel Assistant Surgeon.—A new and curiously-constructed tooth brush has been sent out from England, which may be had at Almy's, corner of Howard and Court streets, which is highly recommended by Dr. Hitchcock. The bristles are so arranged that the teeth can be brushed on the inner side, and thus dislodge all offending particles.—Cholera is gaining at St. Louis and Cincinnati. Several cases appeared last week in New York. Its apparently non-contagious character neither allays public alarm, nor lessens its melancholy mortality. While two classes of physicians are disputing in regard to its contagiousness, the mighty plague sweeps onward, paying no respect to either.—The sum paid for advertising by some of the dealers in patent medicines in New York, is almost incredible. The editors of the New York Sun state that Dr. Townsend has paid them ten thousand dollars within the last four years for advertising; and Sands's great sarsaparilla establishment in that city, expends annually some seventy-five thousand dollars in advertising in different papers through the country. The amount paid by Dr. Townsend for advertising during the last four years is said to be over two hundred thousand dollars. Large sums are also expended in engaging the services of individuals to write their advertisements.—By the recent proposed modification of the laws and by-laws of the Medical Society of Massachusetts, the annual meeting, should the modification be adopted, is to be held hereafter on the third Wednesday of June—in one of the principal towns or cities of the Commonwealth. This season the Society will meet in Boston and dine at Faneuil Hall, May 31st.

To THE EDITOR. Dear Sir,—My acknowledgments are due to Elizur Smith, Esq., of the Massachusetts Legislature, Chairman of the Committee on Manufactures, for the regular receipt of the Boston Medical and Surgical Journal, from the opening of the last session to its close.

Lee, May 7th, 1849. ASA G. WELCH.

To CORRESPONDENTS.—Dr. Mattocks's paper on New Remedies and New Treatment, has been received.

ERRATUM.—Page 302, line 4, for "this resolution," read *this statement.*

MARRIED,—In Boston, Samuel Parkman, M.D., to Miss M. E. Dwight.—Horatio S. Smith, M.D., of Brooklyn, N. Y., to Miss L. D. Munroe.—At Sorel, Canada, Edward Q. Sewell, M.D., to Miss S. Hayden.

DIED,—In Bath, Me., Dr. John Stockbridge, 69.—At Waterville, Me., Dr. Moses Appleton, 76.—At Litchfield, Conn., Dr. Reuben M. Woodruff, 38.—At Charleston, S. C., Dr. Frederick Howes, of Salem, Mass., 25.—At Thomaston, Me., by suicide, Dr. V. P. Coolidge, the murderer of Matthews.

Report of Deaths in Boston—for the week ending May 19th, 65.—Males, 30—females, 35.—Of consumption, 9—measles, 9—scarlet fever, 11—typhus fever, 2—lung fever, 3—inflammation of the lungs, 2—inflammation of the bowels, 2—accidental, 3—erysipelas, 4—child-bed, 2—marasmus, 1—scrofula, 1—throat distemper, 1—dropsy on the brain, 1—cholera infantum, 1—convulsions, 1—dysentery, 1—debility, 1—hooping cough, 1—old age, 1—bronchitis, 1—paralysis, 1—drowned, 1—disease of the brain, 1—inflammation of the brain, 1—teething, 1—infantile, 1—unknown, 1.

Under 5 years, 36—between 5 and 20 years, 11—between 20 and 40 years, 6—between 40 and 60 years, 6—over 60 years, 6.

Addendum to Dr. Dowler's Paper on Vital Dynamics.—I beg leave to add the following note, hoping that it may attract the attention of the American Medical Association. If that distinguished and patriotic medical Congress should call the attention of the Government to an improved method of taking the decennial census, and should recommend as expedient, the adoption, in connection with other nations, of one method for all, as far as may be convenient, great advantages would result to the science of political economy and vital statistics. The mutual interests of nations as well as the interests of science, require that statistical methods should be identical or similar; otherwise numerical comparisons must be very unsatisfactory, nay, almost impossible, as every honest inquirer must admit.

Had the different nations that cultivate statistical science, adopted the same methods, the same points of departure, and the same aims, numerical comparisons would not be, what they are now, very unsatisfactory, because uncertain. Each nation has not only a different process and a different time, but often a different object, in periodical enumerations, according as the military, industrial, or other interest sways the government. Even, in the same country, one annual or decennial census differs, sometimes, essentially in its classification from that by which it was preceded: for example, the census of the United States for 1800, reckons all persons under sixteen years of age as one class. In the next decennial enumeration, this class is divided into one and a fraction, and ten years after into three and a fraction. In 1800, and in the two succeeding decennial periods, all persons aged 45 and over, form but one class; while in 1830, this class undergoes six decimations, and in no census are any persons reckoned as exceeding one hundred years, though some survive that age from ten to forty years, particularly in the South. In every census the black race is classified in a manner wholly different from the white, while, in both, births and deaths are entirely omitted. Hence several of the important elements of vital statistics can never enter into our calculations.

A registry of births, deaths, and ages, is required in order to solve many vital problems. For example, is the comparative mean duration of life in New Orleans, Paris, London, or St. Petersburg, a question to be solved? Is not this question one of simple arithmetic? Suppose the creolized population of New Orleans to be only 100,000—exclude from this reckoning immigration and emigration—suppose the births to be annually 4,000, and the deaths the same—then the population will be stationary, and the mean duration of life will be exactly twenty-five years, however much individual ages may vary from each other. Hence, by using the births or deaths for a divisor, the quotient will be the average or mean life of the entire population. But this will be an erroneous method, if in our population, the births be as above, 4,000, while the deaths are only 2,000 yearly:—for, in this case, the mean life will be doubled, or at least greatly augmented. When the ratio between the births and deaths differs considerably, the mean of the two will serve as a divisor in the obtainment of the mean life, with, at least, an approximative certainty. If the unacclimated portion of New Orleans be reckoned at one-fourth of the entire population, this fourth will probably furnish the half of the annual mortality, and consequently the mean length of life among the creoles will be greatly diminished. Thus, if the mean life of creoles be 45, while that of strangers is only 25, the average of life in New Orleans will be only 35, that is, creole life will be shortened ten years by the doctrine of averages, which, to a greater or lesser extent, actually happens.—*N. Orleans Medical and Surgical Journal.*